

Statewide Health Care Insurance Plan Task Force: Guiding Principles

The Arizona Statewide Health Care Insurance Plan Task Force has defined four (4) principles to guide its deliberations. These guiding principles are listed below along with a set of questions (criteria) to be answered when developing issue papers and health care models. The attached drawing (Diagram A) summarizes these principles and restates four fundamental beliefs of the Task Force.

Health Care, especially Basic Benefits, should be Available and Accessible.

- Are the basic benefits (i.e., service coverage and limitations) clearly defined?
- Are the sub-populations eligible for coverage clearly defined including the coverage (or non-coverage) of non-US citizens?
- Are prevention services that will save money included as part of the basic benefit package? Can they be quantified?
- Will the benefit package provide the opportunity for improvement in health status and the delivery of quality care?
- Is the basic benefit package portable?
- What is the value (i.e., return on investment) of the basic benefit package?
- Does the package contain the appropriate incentives to support the guiding principles?
- Are the right services (plans and providers) available in the right places at the right times?
- Are there incentives in place to encourage providers to provide services where needed?
- Will consumers (e.g., employers, employees, non-employed individuals) use the services, i.e., minimal barriers and appropriate incentives?
- Do commercial carriers have the incentive to participate?

Health Care should be Affordable and Properly Financed.

- Have the cost been clearly identified, both short and long term?
- Have the associated financial risks been clearly identified?
- Can the State afford it? Can members afford it? Can carriers afford to offer it?
- Can the costs be appropriately managed?
- Is it financially self-sustaining and solvent over the long term?
- Does it foster and encourage consumer responsibility?

Health Care should be provided through a Seamless System, offering the highest Quality Care.

- Do pieces of the system fit together well minimizing fragmentation and duplication? Does interdependence and coordination exist between system pieces?
- Have the interrelationships between various programs been taken into consideration such as those sponsored by Title XIX/XXI, Mexican government, Indian Health Services.
- Is one stop shopping made possible in as many situations as practical?
- Are services/care coordinated including the ability to easily move from primary care to specialty?
- Is there the flexibility and adaptability to move pieces around?
- Does the system encourage the highest and best use of services?
- Does a continuum of services exist as the population ages?
- Is the model administratively simple, i.e., low on paperwork and low on hassles?

Health Care should be done in Collaboration and in Cooperation with the various stakeholders both public and private sector and it should foster Competition.

- Is there provider acceptance to the approach?
- Does it create an atmosphere that fosters competition, collaboration, and cooperation especially beyond primary care?
- Has the government's role in facilitating competition been made clear?
- Does it provide a way for dealing properly with providers?
- Does it encourage a better-informed consumer?
- Do the State's educational institutes, e.g., College of Medicine, Community Colleges, and other allied health-training program have a clearly defined role in supporting the system?
- Have the appropriate linkages to employers been established?
- Does the model have adequate links to economic / workforce development?
- Are commercial carriers involved in the model?

Diagram 1: Summary of Guiding Principles and Fundamental Beliefs

